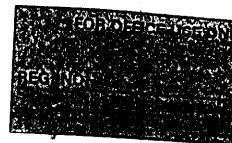


STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
DISCLOSURE REPORT  
CANDIDATE COMMITTEE



SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name: (Must be same as on Form CC-1)

Chris Halford

(b) Committee Name:

Friends for Halford

(c) Mailing Address:

479 Puunene Ave,  
Kahului HI 96732

(d) Phone: (Bus)

(Res)

877-7221

Treasurer's

SECTION II-TYPE OF REPORT AND REPORTING PERIOD:

Check Appropriate Box(es)

1-1-99 through 6-30

☐ 1st Preliminary Primary

☐ Amended

☐ 2nd Preliminary Primary

☐ Short Form (11-212)

☐ Final Primary

☐ Short Form (11-213)

☐ Preliminary General

☐ Final General

☒ Supplemental

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS  
(Complete Section III (Part 2) on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
1. Cash on Hand at Beginning of Election Period (Continuing Committee) OR at the time Form CC-1 was Filed (New Committee).....		153,47
2. Cash on Hand at Beginning of this Reporting Period.....	4353	
3. Total Receipts with Loans (From Line 17, Column A and B).....	3755.00	14,804.09
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	3798.53	14,957.56
5. Subtotal Disbursements (From Line 21, Column A and B).....	1260.97	12,420.00
6. Cash on Hand at Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	2537.56	2,537.56
7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at Beginning of this Reporting Period.....	0	
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A).....	0	
(c) Total of Expenditures and Fundraising Expenditures (Unpaid) at Closing of this Reporting Period (Add Lines 7(a) and 7(b)).....	0	
8. Total of Loans at Closing of this Reporting Period (Schedule E, Line 10).....	11,420.40	
9. Debts Owed BY the Candidate Committee at Closing of this Reporting Period (Add Lines 7(c) and 8).....	0	
10. Other Adjustments to Surplus/Deficit (Attach Explanation).....	0	
11. Subtotal (Add Lines 9 and 10).....	11,420.40	
12. Surplus/Deficit (Subtract Line 11 from Line 6).....	8,882.84	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate

Date

Treasurer

Date

*Signature*

7/30/99

**SECTION III (P 02)-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(If Necessary, Complete Schedules A through H Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
<b>13. Contributions From:</b>		
(a) Individuals/Other Entities/Noncandidate Committees		
(i) Monetary Contributions of \$100 or Less.....	2705.00	7420.
(ii) Non-Monetary Contributions of \$100 or Less.....	0	100.
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A).....	1050.	6651.20
(iv) Total Contributions from Individuals/Other Entities/Noncandidate Committees (Add Lines (a)(i) through (a)(iii) for Columns A and B).....	3755.	14,171.20
(b) Political Party Committees		
(i) Monetary Contributions of \$100 or Less.....	/	/
(ii) Non-Monetary Contributions of \$100 or Less.....		
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule G, Line 2 for Column A).....		
(iv) Total Contributions from Political Party Committees (Add Lines (b)(i) through (b)(iii) for Columns A and B).....		
(c) Candidate and Candidate's Immediate Family		
(i) Monetary Contributions of \$100 or Less.....	0	0
(ii) Non-Monetary Contributions of \$100 or Less.....	0	0
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule D, Line 2 for Column A).....	0	0
(iv) Total Contributions from Candidate and Candidate's Immediate Family (Add Lines (c)(i) through (c)(iii) for Columns A and B).....	0	0
(d) Total Contributions (Add Lines 13(a)(iv), 13(b)(iv) and 13(c)(iv) for Columns A and B).....	3755.	14,171.20
14. Public Funds and Other Receipts (Interest, Refunds, Etc.) (Schedule C, Line 2 for Column A).....	0	0
15. Total Receipts without Loans (Add Lines 13(d) and 14 for Columns A and B).....	3755.	14,171.20
<b>16. Loans</b>		
(a) Candidate and Candidate's Immediate Family (Schedule E, Line 1 for Column A)	0	632.89
(b) Financial Institutions (Schedule E, Line 4 for Column A).....	0	0
(c) Other Loans (Schedule E, Line 7 for Column A).....	0	0
(d) Total Loans (Add Lines 16(a) through 16(c) for Columns A and B).....	0	632.89
17. Total Receipts with Loans (Add Lines 15 and 16(d) for Columns A and B).....	3755.	14,804.09
<b>DISBURSEMENTS</b>		
18. Expenditures (Schedule B, Line 3 for Column A).....	1260.95	12,320.00
19. Fundraising Expenditures (Schedule F, Line 3 for Column A).....	0	0
<b>20. Loan Repayments</b>		
(a) Candidate and Candidate's Immediate Family (Schedule E, Line 2 for Column A)	0	100.
(b) Financial Institutions (Schedule E, Line 5 for Column A).....	0	0
(c) Other Loans (Schedule E, Line 8 for Column A).....	0	0
(d) Total Loan Repayments (Add Lines 20(a) through 20(c) for Columns A and B)...	0	100.
21. Subtotal Disbursements (Add Lines 18, 19, and 20(d) for Columns A and B).....	1260.97	12,420.
22. Expenditures and Fundraising Expenditures (Unpaid) (Schedule H, Line 7 for Column A) (Net Change This Period).....	0	0
23. Total Disbursements (Add Lines 21 and 22 for Columns A and B).....	1260.97	12,420.

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A**

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE**

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE \_\_\_\_\_ OF \_\_\_\_\_

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
3-17-99	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION McBarnett, A. and M.J. 467, Laulea Pl. Paia HI 96779		500	500
4-22-99	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION a+b HI PAC PO Box 3440 Honolulu HI 96801		200	200
5-28-99	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION HSFFA PAC 2305 S. Beretania #202 Honolulu HI 96826		200	200
6-16-99	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Northern Trust Co. DuPage Oak Brook IL		150	150
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

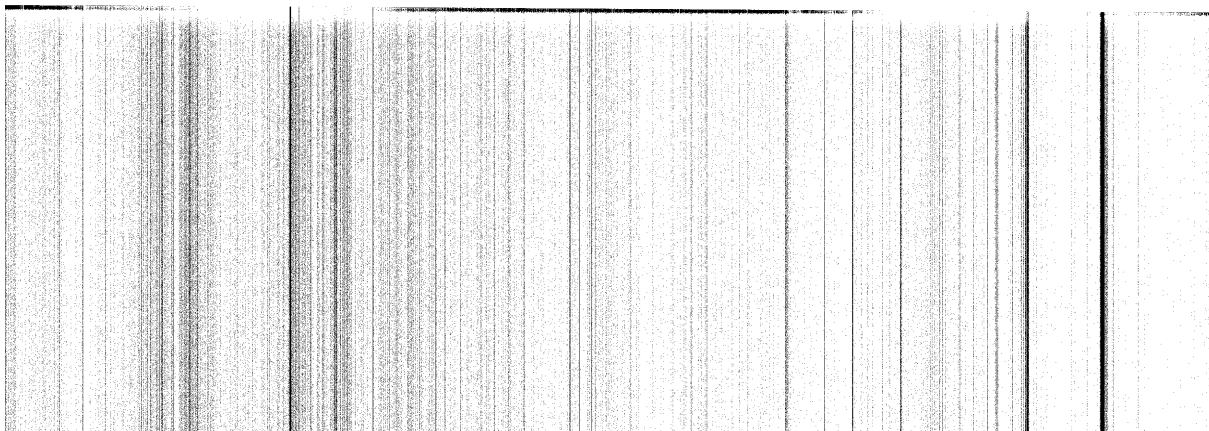
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
1-4-99	Candidate	Reimbursement for sign hardware	57.26
3-31-99	Custom Products of Hawaii 609 Waiakamilo Rd. Honolulu HI 96817	bumper stickers	189.31
4-16-99	Les Among	Reimbursement for party expense	200.00
4-23-99	Wally Wok, Inc. P.O. Box 893254 Mililani HI 96789	Catering	330.00
6-24-99	Candidate	Reimbursement for party expense	486.40

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 1260.97
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18, COLUMN A)..... 1260.97



**STATE OF HAWAII**  
**CAMPAIGN SPENDING COMMISSION**  
**SCHEDULE E**  
**LOANS**  
**CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.  
 CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

**CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY MEMBER	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN REPAYMENT THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
11-2-98	Candidate	11,420,40	—	—	11,420,40
1. TOTAL OF LOANS FROM CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18(a), COLUMN A).....					
2. TOTAL OF LOAN REPAYMENTS FOR CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(a), COLUMN A).....					
3. TOTAL OF LOANS FROM CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY AT CLOSING OF THIS REPORTING PERIOD.....					11,420,40

**FINANCIAL INSTITUTIONS**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF FINANCIAL INSTITUTIONS	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN REPAYMENT THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
4. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18(b), COLUMN A).....					
5. TOTAL OF LOAN REPAYMENTS FOR FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(b), COLUMN A).....					
6. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS AT CLOSING OF THIS REPORTING PERIOD.....					

**OTHER LOANS**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF SOURCE OF OTHER LOANS	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN REPAYMENT THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
7. TOTAL OF LOANS FROM SOURCE OF OTHER LOANS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18(c), COLUMN A).....					
8. TOTAL OF LOAN REPAYMENTS FOR SOURCE OF OTHER LOANS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(c), COLUMN A).....					
9. TOTAL OF LOANS FROM SOURCE OF OTHER LOANS AT CLOSING OF THIS REPORTING PERIOD.....					
10. TOTAL OF LOANS AT CLOSING OF THIS REPORTING PERIOD (ADD LINES 3, 6 AND 9 AND ENTER TOTAL ON FORM CC-5, SECTION III (PART 1), LINE 8).....					